

## EAST Search History

Ref #	Hits	Search Query	DBs	Default Operator	Plurals	Time Stamp
L1	59476	\$8parin lmwh heparan hyaluron\$4 dermatan keratan chondroitin glycosaminoglycan	US-PGPUB; USPAT	OR	ON	2006/12/04 09:14
L2	218706	cervix cervical labor pregnancy pregnant parturition	US-PGPUB; USPAT	OR	ON	2006/12/04 08:50
L3	907	1 same 2	US-PGPUB; USPAT	OR	ON	2006/12/04 07:30
L4	28805	pregnant pregnancy	US-PGPUB; USPAT	OR	ON	2006/12/04 07:30
L5	522	3 and 4	US-PGPUB; USPAT	OR	ON	2006/12/04 07:30
L6	1889417	ripen\$4 prim\$4 induc\$6 contract\$6	US-PGPUB; USPAT	OR	ON	2006/12/04 07:31
L7	496	5 and 6	US-PGPUB; USPAT	OR	ON	2006/12/04 07:31
L8	496	7 and (1 2)	US-PGPUB; USPAT	OR	ON	2006/12/04 07:32
L9	1496019	@ad>"20020102"	US-PGPUB; USPAT	OR	ON	2006/12/04 07:32
L10	219	8 not 9	US-PGPUB; USPAT	OR	ON	2006/12/04 08:41
L11	14149	vegf	US-PGPUB; USPAT	OR	ON	2006/12/04 08:41
L12	3184	1 same 11	US-PGPUB; USPAT	OR	ON	2006/12/04 08:41
L13	1018	12 not 9	US-PGPUB; USPAT	OR	ON	2006/12/04 08:42
L14	13147	\$8parin lmwh heparan hyaluron\$4 dermatan keratan chondroitin glycosaminoglycan	EPO; JPO; DERWENT	OR	ON	2006/12/04 08:50
L15	84384	cervix cervical labor pregnancy pregnant parturition	EPO; JPO; DERWENT	OR	ON	2006/12/04 09:14
L16	145	14 and 15	EPO; JPO; DERWENT	OR	ON	2006/12/04 09:11
L17	765	OXYTOCIN	EPO; JPO; DERWENT	OR	ON	2006/12/04 09:11
L18	21	14 and 17	EPO; JPO; DERWENT	OR	ON	2006/12/04 09:11
L19	4814	oxytocin	US-PGPUB; USPAT	OR	ON	2006/12/04 09:14
L20	603	1 same 19	US-PGPUB; USPAT	OR	ON	2006/12/04 09:14

## EAST Search History

L21	316	20 not 9	US-PGPUB; USPAT	OR	ON	2006/12/04 09:14
L22	7291	pregnancy pregnant parturition	EPO; JPO; DERWENT	OR	ON	2006/12/04 09:15
L23	0	21 and 22	EPO; JPO; DERWENT	OR	ON	2006/12/04 09:15

## EAST Search History

Ref #	Hits	Search Query	DBs	Default Operator	Plurals	Time Stamp
L1	48370	heparin lmwh enoxaparin fragmin danaproid reviparin heparinoid chondroitin heparan dermatan	US-PGPUB; USPAT	OR	ON	2006/12/06 15:14
L2	133668	topical\$4 transdermal\$4	US-PGPUB; USPAT	OR	ON	2006/12/06 15:15
L3	812	1 same 2	US-PGPUB; USPAT	OR	ON	2006/12/06 15:16
L4	6876	vte thromboembol\$8	US-PGPUB; USPAT	OR	ON	2006/12/06 15:16
L5	60	3 and 4	US-PGPUB; USPAT	OR	ON	2006/12/06 15:17
L6	27470	dvt thrombosis	US-PGPUB; USPAT	OR	ON	2006/12/06 15:18
L7	258	3 and (4 6)	US-PGPUB; USPAT	OR	ON	2006/12/06 15:19
L8	14576	pregnant prenancy	US-PGPUB; USPAT	OR	ON	2006/12/06 15:19
L9	12	7 and 8	US-PGPUB; USPAT	OR	ON	2006/12/06 15:26
L10	0	9 not 7	US-PGPUB; USPAT	OR	ON	2006/12/06 15:26
L11	246	7 not 9	US-PGPUB; USPAT	OR	ON	2006/12/06 15:58
L12	83	1 same 8	US-PGPUB; USPAT	OR	ON	2006/12/06 15:58
L13	34	12 and 2	US-PGPUB; USPAT	OR	ON	2006/12/06 15:58
L14	30	13 not 7	US-PGPUB; USPAT	OR	ON	2006/12/06 15:58

(FILE 'HOME' ENTERED AT 10:53:56 ON 04 DEC 2006)

FILE 'MEDLINE, EMBASE, BIOSIS, CAPLUS' ENTERED AT 10:54:25 ON 04 DEC 2006

L1 67864 S OXYTOCIN  
L2 757 S PITOCIN  
L3 68071 S L1 OR L2  
L4 256581 S HEPARIN  
L5 678 S LMH  
L6 6811 S LMW  
L7 1325 S L4 AND L6  
L8 7173 S LMWH  
L9 10392 S ENOXAPARIN  
L10 5219 S DALTEPARIN  
L11 2362 S FRAGMIN  
L12 904 S REVIPARIN  
L13 3052 S NADROPARIN  
L14 1851 S TINZAPARIN  
L15 3686 S HEPARINOID  
L16 338 S DANAPROID  
L17 746 S ORG 10172  
L18 14 S ORG10172  
L19 35761 S HEPARAN  
L20 47899 S CHONDROITIN  
L21 15702 S DERMATAN  
L22 100672 S L7 OR L8 OR L9 OR L10 OR L11 OR L12 OR L13 OR L14 OR L15 O  
L23 84 S L1 AND L22  
L24 75 DUP REM L23 (9 DUPLICATES REMOVED)  
L25 170699 S LABOR  
L26 144772 S CERVIX  
L27 350875 S CERVICAL  
L28 6854253 S INDUC?  
L29 752541 S CONTRACT?  
L30 7881092 S L25 OR L26 OR L27 OR L28 OR L29  
L31 21 S L24 AND L30  
L32 54 S L24 NOT L31  
L33 279366 S PREGNANT  
L34 5 S L32 AND L33

L31 ANSWER 1 OF 21 MEDLINE on STN  
 ACCESSION NUMBER: 2004357966 MEDLINE <<LOGINID::20061204>>  
 DOCUMENT NUMBER: PubMed ID: 15261112  
 TITLE: Activity-dependent regulation of a chondroitin sulfate proteoglycan 6B4 phosphacan/RPTPbeta in the hypothalamic supraoptic nucleus.  
 AUTHOR: Miyata Seiji; Akagi Akio; Hayashi Noriko; Watanabe Kazutada; Oohira Atsuhiko  
 CORPORATE SOURCE: Department of Applied Biology, Kyoto Institute of Technology, Matsugasaki, Sakyo, Kyoto 606-8585, Japan.. smiyata@ipc.kit.ac.jp  
 SOURCE: Brain research, (2004 Aug 13) Vol. 1017, No. 1-2, pp. 163-71.  
 Journal code: 0045503. ISSN: 0006-8993.  
 PUB. COUNTRY: Netherlands  
 DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)  
 LANGUAGE: English  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 200410  
 ENTRY DATE: Entered STN: 21 Jul 2004  
 Last Updated on STN: 5 Oct 2004  
 Entered Medline: 4 Oct 2004

AB The hypothalamic magnocellular neurons, synthesizing arginine vasopressin (AVP) and oxytocin, are well known to show structural plasticity during chronic physiological stimulation. We have previously reported that 6B4 phosphacan/receptor-type protein-tyrosine phosphatasebeta (RPTPbeta), a chondroitin sulfate proteoglycan is highly expressed in the supraoptic nucleus (SON) of adult hypothalamus. Here, we undertook to study the activity-dependent regulation of 6B4 phosphacan/RPTPbeta in this system. Double labeling confocal microscopy demonstrated in the SON that 6B4 phosphacan/RPTPbeta-immunoreactive perineuronal nets were seen around AVP-containing somata and dendrites and its distribution pattern was well coincided with that of TAG-1. Quantitative immunohistochemical and Western analyses showed that 1-week salt loading, known as the chronic physiological stimulation for inducing the structural changes such as synaptic remodeling and direct neuronal membrane apposition, decreased 6B4 phosphacan/RPTPbeta levels in the SON, but did not alter TAG-1 levels. The 6B4 phosphacan/RPTPbeta levels were returned to control basal values within 3 weeks after the cessation of the chronic stimulation. Activity-dependent decreases in 6B4 phosphacan/RPTPbeta levels of the SON were confirmed when Western and immunohistochemical samples were digested with chondroitinase ABC, indicating that the decrease in 6B4 phosphacan/RPTPbeta levels was due to disappearance of 6B4 phosphacan/RPTPbeta core protein rather than increase in chondroitin sulfate glycosaminoglycans. With electron microscopy, the electron-dense immunoproducs for 6B4 phosphacan/RPTPbeta were found on the membrane surface of axons and glial processes, but not at synaptic junctions in control SON, and its immunoreactivity was eliminated with the chronic salt loading. The present results indicate that the levels of 6B4 phosphacan/RPTPbeta are regulated with activity-dependent manner and may be concerned with the structural plasticity seen in the SON.

L31 ANSWER 2 OF 21 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
 ACCESSION NUMBER: 2005301341 EMBASE <<LOGINID::20061204>>  
 TITLE: A subdural abscess and infected blood patch complicating regional analgesia for labour.  
 AUTHOR: Collis R.E.; Harries S.E.  
 CORPORATE SOURCE: Dr. S.E. Harries, Department of Anaesthetics, University Hospital of Wales, Heath Park, Cardiff CF14 4XW, United Kingdom. sarahharries@doctors.net.uk  
 SOURCE: International Journal of Obstetric Anesthesia, (2005) Vol. 14, No. 3, pp. 246-251. .  
 Refs: 16  
 ISSN: 0959-289X CODEN: IOANER  
 PUBLISHER IDENT.: S 0959-289X(05)00038-5  
 COUNTRY: United Kingdom  
 DOCUMENT TYPE: Journal; Article  
 FILE SEGMENT: 008 Neurology and Neurosurgery  
 010 Obstetrics and Gynecology

024 Anesthesiology  
 037 Drug Literature Index  
 038 Adverse Reactions Titles

LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 28 Jul 2005  
 Last Updated on STN: 28 Jul 2005

AB We report two very unusual cases of infection complicating labour analgesia. The first case was a sub-dural abscess presenting with deep-seated backache seven days after combined spinal-epidural analgesia for labour. The second was a painful lumbar swelling and septicaemia that presented three days after a blood patch for a post dural puncture headache. Because of their complicated and unusual presentation, the diagnosis and management of both were initially delayed. .COPYRGT. 2005 Elsevier Ltd. All rights reserved.

L31 ANSWER 3 OF 21 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2004390226 EMBASE <<LOGINID::20061204>>  
 TITLE: Postpartum post-dural puncture headache: Is your differential diagnosis complete?  
 AUTHOR: Bleeker C.P.; Hendriks I.M.; Booi L.H.D.J.  
 CORPORATE SOURCE: C.P. Bleeker, Department of Anaesthesiology, St. Radboud Univ. Med. Ctr. Nijmegen, Nijmegen, Netherlands.  
 c.bleeker@anes.umcn.nl  
 SOURCE: British Journal of Anaesthesia, (2004) Vol. 93, No. 3, pp. 461-464. .  
 Refs: 28  
 ISSN: 0007-0912 CODEN: BJANAD  
 COUNTRY: United Kingdom  
 DOCUMENT TYPE: Journal; Article  
 FILE SEGMENT: 008 Neurology and Neurosurgery  
 010 Obstetrics and Gynecology  
 014 Radiology  
 024 Anesthesiology  
 037 Drug Literature Index  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 30 Sep 2004  
 Last Updated on STN: 30 Sep 2004

AB We describe a patient with an intracerebral haemorrhage following an accidental dural puncture during an attempted epidural for pain relief in labour. Anaesthetists need to include intracerebral haemorrhage in the differential diagnosis of post-dural puncture headache in the puerperium. .COPYRGT. The Board of Management and Trustees of the British Journal of Anaesthesia 2004.

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ACCESSION NUMBER: 2004319081 EMBASE <<LOGINID::20061204>>  
 TITLE: Peripartum management of a suspected spinal hematoma after epidural puncture [7].  
 AUTHOR: Charbit B.; Samain E.; Albaladejo P.; El Houari Y.; Le Corre F.; Redondo A.; Deval B.; Marty J.  
 CORPORATE SOURCE: Dr. B. Charbit, Dept. of Anesthesia/Intensive Care, Hopital Beaujon, University Xavier Bichat, Clichy, France  
 SOURCE: Anesthesia and Analgesia, (2004) Vol. 99, No. 2, pp. 624-625. .  
 Refs: 4  
 ISSN: 0003-2999 CODEN: AACRAT  
 COUNTRY: United States  
 DOCUMENT TYPE: Journal; Letter  
 FILE SEGMENT: 008 Neurology and Neurosurgery  
 010 Obstetrics and Gynecology  
 024 Anesthesiology  
 037 Drug Literature Index  
 LANGUAGE: English  
 ENTRY DATE: Entered STN: 19 Aug 2004  
 Last Updated on STN: 19 Aug 2004

L31 ANSWER 5 OF 21 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2004123418 EMBASE <<LOGINID::20061204>>  
 TITLE: Labor analgesia for the parturient with cardiac disease: What does an obstetrician need to know?  
 AUTHOR: Kuczkowski K.M.  
 CORPORATE SOURCE: K.M. Kuczkowski, Department of Anesthesiology, UCSD Medical Center, 200 West Arbor Drive, San Diego, CA 92103-8812, United States. kkuczkowski@ucsd.edu  
 SOURCE: Acta Obstetricia et Gynecologica Scandinavica, (2004) Vol. 83, No. 3, pp. 223-233. .  
 Refs: 54  
 ISSN: 0001-6349 CODEN: AOGSAE  
 COUNTRY: Denmark  
 DOCUMENT TYPE: Journal; General Review  
 FILE SEGMENT: 010 Obstetrics and Gynecology  
 018 Cardiovascular Diseases and Cardiovascular Surgery  
 037 Drug Literature Index  
 038 Adverse Reactions Titles  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 12 Apr 2004  
 Last Updated on STN: 12 Apr 2004

AB Maternal heart disease complicates 0.2-3% of pregnancies. The optimal management of the pregnant patient with cardiac disease depends on the cooperative efforts of the obstetrician, the cardiologist and the anesthesiologist involved in peripartum care. A comprehensive understanding of physiology of pregnancy and pathophysiology of underlying cardiac disease is of primary importance in provision of obstetric analgesia or anesthesia for this high-risk group of patients. This article will review the current guidelines and standards pertinent to management of obstetric analgesia and anesthesia in parturients with cardiac disease. .COPYRG. Acta Obstet Gynecol Scand 83 2004.

L31 ANSWER 6 OF 21 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2004111921 EMBASE <<LOGINID::20061204>>  
 TITLE: Prolonged treatment of massive postpartum haemorrhage with recombinant factor VIIa: Case report and review of the literature.  
 AUTHOR: Boehlen F.; Morales M.A.; Fontana P.; Ricou B.; Irion O.; De Moerloose P.  
 CORPORATE SOURCE: Prof. P. De Moerloose, Haemostasis Unit, University Hospitals of Geneva, 1211 Geneva 14, Switzerland  
 SOURCE: BJOG: An International Journal of Obstetrics and Gynaecology, (2004) Vol. 111, No. 3, pp. 284-287. .  
 Refs: 13  
 ISSN: 1470-0328 CODEN: BIOGFQ  
 COUNTRY: United Kingdom  
 DOCUMENT TYPE: Journal; General Review  
 FILE SEGMENT: 010 Obstetrics and Gynecology  
 025 Hematology  
 037 Drug Literature Index  
 LANGUAGE: English  
 ENTRY DATE: Entered STN: 1 Apr 2004  
 Last Updated on STN: 1 Apr 2004

L31 ANSWER 7 OF 21 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2003437732 EMBASE <<LOGINID::20061204>>  
 TITLE: Triplet pregnancy in a Jehovah's Witness: Recombinant human erythropoietin and iron supplementation for minimising the risks of excessive blood loss.  
 AUTHOR: Kalu E.; Wayne C.; Croucher C.; Findley I.; Manyonda I.  
 CORPORATE SOURCE: Dr. I. Manyonda, Dept. of Obstetrics and Gynaecology, Lanesborough Wing, St. George's Healthcare NHS Trust, Blackshaw Road, London SW17 0QT, United Kingdom  
 SOURCE: BJOG: An International Journal of Obstetrics and Gynaecology, (2002) Vol. 109, No. 6, pp. 723-725. .  
 Refs: 15  
 ISSN: 1470-0328 CODEN: BIOGFQ  
 PUBLISHER IDENT.: S 1470-0328(02)01122-9  
 COUNTRY: United Kingdom  
 DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 010 Obstetrics and Gynecology  
 037 Drug Literature Index  
 LANGUAGE: English  
 ENTRY DATE: Entered STN: 1 Dec 2003  
 Last Updated on STN: 1 Dec 2003

L31 ANSWER 8 OF 21 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2003063176 EMBASE <<LOGINID::20061204>>  
 TITLE: The Klippel-Trenaunay syndrome in pregnancy.  
 AUTHOR: Watermeyer S.R.; Davies N.; Goodwin R.  
 CORPORATE SOURCE: Dr. S.R. Watermeyer, Dept. of Obstetrics and Gynaecology, University Hospital of Wales, Heath Park, Cardiff CF14 4XW, United Kingdom  
 SOURCE: BJOG: An International Journal of Obstetrics and Gynaecology, (1 Nov 2002) Vol. 109, No. 11, pp. 1301-1302.  
 Refs: 8  
 ISSN: 1470-0328 CODEN: BIOGFQ  
 PUBLISHER IDENT.: S 1470-0328(02)01686-5  
 COUNTRY: United Kingdom  
 DOCUMENT TYPE: Journal; Article  
 FILE SEGMENT: 010 Obstetrics and Gynecology  
 018 Cardiovascular Diseases and Cardiovascular Surgery  
 037 Drug Literature Index  
 LANGUAGE: English  
 ENTRY DATE: Entered STN: 20 Feb 2003  
 Last Updated on STN: 20 Feb 2003

L31 ANSWER 9 OF 21 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2002397594 EMBASE <<LOGINID::20061204>>  
 TITLE: Unexplained fitting in three parturients suffering from postdural puncture headache.  
 AUTHOR: Oliver C.D.; White S.A.  
 CORPORATE SOURCE: C.D. Oliver, Department of Anaesthetics, Royal Brompton Hospital, Sydney Street, London SW3 6NP, United Kingdom  
 SOURCE: British Journal of Anaesthesia, (1 Nov 2002) Vol. 89, No. 5, pp. 782-785.  
 Refs: 19  
 ISSN: 0007-0912 CODEN: BJANAD  
 COUNTRY: United Kingdom  
 DOCUMENT TYPE: Journal; Article  
 FILE SEGMENT: 008 Neurology and Neurosurgery  
 010 Obstetrics and Gynecology  
 024 Anesthesiology  
 037 Drug Literature Index  
 038 Adverse Reactions Titles  
 050 Epilepsy  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 21 Nov 2002  
 Last Updated on STN: 21 Nov 2002

AB We present the cases of three women who, within a 6-month period, suffered post-partum generalized tonic-clonic seizures. All had received an epidural in labour for analgesia and were subsequently diagnosed as suffering from postdural puncture headache. All were treated for that headache with Synacthen and one also received sumatriptan before her seizures. All made satisfactory recoveries and were discharged home. None displayed classical patterns suggestive of pre-eclampsia, meningitis, cortical venous thrombosis or any other pathological process that might explain these events adequately, and the specific precipitating factors were left unidentified.

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ACCESSION NUMBER: 2002042279 EMBASE <<LOGINID::20061204>>  
 TITLE: Misoprostol - For cervical ripening?.  
 AUTHOR: Ginath S.; Zakut H.V.  
 CORPORATE SOURCE: S. Ginath, Sackler Faculty of Medicine, Edith Wolfson Medical Center, Tel-Aviv University, P.O. Box 5, Holon 58100, Israel. ginath@post.tau.ac.il



SOURCE: European Journal of Obstetrics Gynecology and Reproductive  
Biology, (1 Dec 2001) Vol. 99, No. 2, pp. 152-153. .  
Refs: 30  
ISSN: 0301-2115 CODEN: EOGRAL  
PUBLISHER IDENT.: S 0301-2115(01)00413-4  
COUNTRY: Ireland  
DOCUMENT TYPE: Journal; General Review  
FILE SEGMENT: 010 Obstetrics and Gynecology  
037 Drug Literature Index  
039 Pharmacy  
LANGUAGE: English  
ENTRY DATE: Entered STN: 7 Feb 2002  
Last Updated on STN: 7 Feb 2002

L31 ANSWER 11 OF 21 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 94114954 EMBASE <<LOGINID::20061204>>  
DOCUMENT NUMBER: 1994114954  
TITLE: Pharmacological stimulation of t-PA release.  
AUTHOR: Klocking H.-P.; Markwardt F.  
CORPORATE SOURCE: Medical Academy, Institute of Pharmacology/Toxicology,  
Nordhauser Strasse 74, D-99098 Erfurt, Germany  
SOURCE: Pharmazie, (1994) Vol. 49, No. 4, pp. 227-230. .  
ISSN: 0031-7144 CODEN: PHARAT  
COUNTRY: Germany  
DOCUMENT TYPE: Journal; General Review  
FILE SEGMENT: 025 Hematology  
030 Pharmacology  
037 Drug Literature Index  
LANGUAGE: English  
SUMMARY LANGUAGE: English; German  
ENTRY DATE: Entered STN: 18 May 1994  
Last Updated on STN: 18 May 1994

AB The acute release of tissue-type plasminogen activator t-PA from the vascular endothelium is of decisive importance for the prevention of intravascular fibrin deposits. A dose-dependent t-PA release from the isolated perfused vascular preparations may be induced by mediators (platelet-activating factor, bradykinin, histamine) adrenergic and cholinergic transmitters (isoprenaline, acetylcholine), thrombin, heparin and analogues, and 1-desamino-8-D-arginine-vasopressin (DDAVP). Most of the compounds were shown to enhance the t-PA activity also in animal experiments (rats, rabbits, mini pigs). The pharmacologic stimulation of the t-PA release may be convenient for short-term thrombosis, prophylaxis and partial thrombolysis. Presently, this could only be achieved by unfractionated and low molecular weight heparins which have been shown to release t-PA.

L31 ANSWER 12 OF 21 CAPLUS COPYRIGHT 2006 ACS on STN

ACCESSION NUMBER: 2006:1097408 CAPLUS <<LOGINID::20061204>>  
DOCUMENT NUMBER: 145:433261  
TITLE: Human marker genes and agents for diagnosis, treatment and prophylaxis of cardiovascular disorders and atherosclerosis  
INVENTOR(S): Betz, Ulrich; D'Urso, Donatella; Kolkhof, Peter; Seewald, Michael; Strayle, Jochen; Grabner, Anne; Hannus, Michael  
PATENT ASSIGNEE(S): Bayer Healthcare A.-G., Germany  
SOURCE: PCT Int. Appl., 84pp.  
CODEN: PIXXD2  
DOCUMENT TYPE: Patent  
LANGUAGE: English  
FAMILY ACC. NUM. COUNT: 4  
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2006108581	A2	20061019	WO 2006-EP3216	20060408
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KN, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, LY, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE,			

SG, SK, SL, SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC,  
 VN, YU, ZA, ZM, ZW  
 RW: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE,  
 IS, IT, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ,  
 CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BW, GH,  
 GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY,  
 KG, KZ, MD, RU, TJ, TM

PRIORITY APPLN. INFO.: US 2005-671832P P 20050415

AB The invention relates to novel targets in the screening for compds. useful in the treatment and/or prophylaxis of a disease selected from the group comprising cardiovascular diseases, disorders of lipid metabolism or atherosclerosis. A human druggable genome siRNA library was screened in a cellular assay based on expression of LDL receptor as measured by binding of LDL-DiI in Huh7 hepatoma cells. Screening data and gene-specific information is provided for 467 siRNAs targeting 467 different genes, selected as positives from the total number of screened genes. The invention relates to novel compds. for use as a medicament for diseases or conditions involving a disease selected from the group comprising cardiovascular diseases, disorders of lipid metabolism, or atherosclerosis. The invention especially relates to antagonists and expression-inhibitory compds. that target G-protein coupled receptors (GPCRs), kinases, and proteases. The invention further relates to methods for identifying these antagonists and expression-inhibitory compds., and methods for diagnosing the selected diseases.

L31 ANSWER 13 OF 21 CAPLUS COPYRIGHT 2006 ACS on STN

ACCESSION NUMBER: 2006:1031075 CAPLUS <<LOGINID::20061204>>

DOCUMENT NUMBER: 145:394723

TITLE: Gene expression profiles in multiple brain structures in the diagnosis and therapy of neuropsychiatric disorders

INVENTOR(S): Akil, Huda; Atz, Mary; Bunney, William E., Jr.;  
 Byerley, William; Casey, Kathleen; Choudary,  
 Prabhakara V.; Evans, Simon J.; Jones, Edward G.; Li,  
 Jun; Lopez, Juan F.; Myers, Richard; Rollins, Brandi;  
 Thompson, Robert C.; Tomita, Hiroaki; Vawter, Marquis  
 P.; Watson, Stanley

PATENT ASSIGNEE(S): The Board of Trustees of the Leland Stanford Junior  
 University, USA

SOURCE: PCT Int. Appl., 141pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2006105516	A2	20061005	WO 2006-US12465	20060330
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KN, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, LY, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			

US 2006257903 A1 20061116 US 2006-396050 20060331

PRIORITY APPLN. INFO.: US 2005-667299P P 20050331

US 2006-776103P P 20060222

AB Genes showing altered levels of expression in patients with mental disorders, including psychotic disorders such as schizophrenia and mood disorders such as major depression disorder and bipolar disorder, are identified for use in diagnosis and in the development of therapies. The invention also provides methods of identifying modulators of such mental disorders as well as methods of using these modulators to treat patients suffering from such mental disorders. Candidate genes were identified by post-mortem anal. of gene expression profiles in brains of schizophrenics

and control patients.

L31 ANSWER 14 OF 21 CAPLUS COPYRIGHT 2006 ACS on STN

ACCESSION NUMBER: 2005:671727 CAPLUS <<LOGINID::20061204>>  
DOCUMENT NUMBER: 143:166667  
TITLE: The curcuminoids- and anthocyanins-responsive genes in human adipocytes and their use in screenings of anti-obesity and anti-diabetes drugs  
INVENTOR(S): Ueno, Yuki; Tsuda, Takanori; Takanori, Hitoshi; Yoshikawa, Toshikazu; Osawa, Toshihiko  
PATENT ASSIGNEE(S): Biomarker Science Co., Ltd., Japan  
SOURCE: Jpn. Kokai Tokkyo Koho, 85 pp.  
CODEN: JKXXAF  
DOCUMENT TYPE: Patent  
LANGUAGE: Japanese  
FAMILY ACC. NUM. COUNT: 1  
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
JP 2005198640	A2	20050728	JP 2004-53258	20040227
PRIORITY APPLN. INFO.:			JP 2003-394758	A 20031125

AB The curcuminoids- and anthocyanins-responsive gene expression profiles in adipocytes have been revealed. The curcuminoids- and anthocyanins-responsive genes are designed to be used as the index markers in the screenings of the substances that can affect the gene expression patterns in obesity and diabetes. These substances can be the candidates of anti-obesity and anti-diabetes drugs. Therefore, the groups of curcuminoids- and anthocyanins-responsive genes are intended to be used as markers in a form of kit such as DNA chip for the screening of anti-obesity and anti-diabetes drugs.

L31 ANSWER 15 OF 21 CAPLUS COPYRIGHT 2006 ACS on STN

ACCESSION NUMBER: 2005:614580 CAPLUS <<LOGINID::20061204>>  
DOCUMENT NUMBER: 143:139175  
TITLE: Frequency-assisted transdermal agent delivery method and system  
INVENTOR(S): Chan, Keith T.; Cormier, Michel J. N.; Lin, WeiQi  
PATENT ASSIGNEE(S): USA  
SOURCE: U.S. Pat. Appl. Publ., 24 pp.  
CODEN: USXXCO  
DOCUMENT TYPE: Patent  
LANGUAGE: English  
FAMILY ACC. NUM. COUNT: 1  
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 2005153873	A1	20050714	US 2004-971441	20041021
AU 2004314416	A1	20050804	AU 2004-314416	20041021
WO 2005069758	A2	20050804	WO 2004-US34923	20041021
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW				
RW: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG				
PRIORITY APPLN. INFO.:			US 2004-535275P	P 20040109
			WO 2004-US34923	W 20041021

AB The invention discloses an apparatus and method for transdermally delivering a biol. active agent comprising a delivery system having a microprojection member (or system) that includes a plurality of microprojections (or array thereof) that are adapted to pierce through the stratum corneum into the underlying epidermis layer, or epidermis and dermis layers, a formulation containing the biol. active agent and an oscillation-inducing device. In one embodiment, the biol. active agent is contained in a biocompatible coating that is applied to the microprojection member. In a

further embodiment, the delivery system includes a gel pack having an agent-containing hydrogel formulation that is disposed on the microprojection member after application to the skin of a patient. In an alternative embodiment, the biol. active agent is contained in both the coating and the hydrogel formulation.

L31 ANSWER 16 OF 21 CAPLUS COPYRIGHT 2006 ACS on STN

ACCESSION NUMBER: 2004:287758 CAPLUS <<LOGINID::20061204>>

DOCUMENT NUMBER: 140:302345

TITLE: Genes showing altered patterns of expression in the central nervous system in multiple sclerosis and their diagnostic and therapeutic use

INVENTOR(S): Dangond, Fernando; Hwang, Daehee; Gullans, Steven R.

PATENT ASSIGNEE(S): Brigham and Women's Hospital, Inc., USA

SOURCE: PCT Int. Appl., 139 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004028339	A2	20040408	WO 2003-US29451	20030925
WO 2004028339	A3	20040805		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			
AU 2003275029	A1	20040419	AU 2003-275029	20030925
US 2004156826	A1	20040812	US 2003-670766	20030925
PRIORITY APPLN. INFO.:			US 2002-414219P	P 20020927
			WO 2003-US29451	W 20030925

AB The present invention identifies a number of gene markers whose expression is altered in multiple sclerosis (MS). These markers can be used to diagnose or predict MS in subjects, and can be used in the monitoring of therapies. In addition, these genes identify therapeutic targets, the modification of which may prevent MS development or progression.

L31 ANSWER 17 OF 21 CAPLUS COPYRIGHT 2006 ACS on STN

ACCESSION NUMBER: 2003:532530 CAPLUS <<LOGINID::20061204>>

DOCUMENT NUMBER: 139:79188

TITLE: Use of sulfated glycosaminoglycans for establishing effective labor in women

INVENTOR(S): Ekman-Ordeberg, Gunvor; Malmstrom, Anders

PATENT ASSIGNEE(S): Karolinska Innovations AB, Swed.

SOURCE: PCT Int. Appl., 19 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2003055499	A1	20030710	WO 2003-SE4	20030102
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			

SE 2002000005	A	20030703	SE 2002-5	20020102
SE 521676	C2	20031125		
CA 2472093	AA	20030710	CA 2003-2472093	20030102
AU 2003201787	A1	20030715	AU 2003-201787	20030102
EP 1461049	A1	20040929	EP 2003-700633	20030102
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, HU, SK				
NZ 533856	A	20041224	NZ 2003-533856	20030102
CN 1612741	A	20050504	CN 2003-801944	20030102
JP 2005513148	T2	20050512	JP 2003-556076	20030102
ZA 2004005015	A	20050624	ZA 2004-5015	20040624
US 2005075314	A1	20050407	US 2004-500284	20040701
NO 2004003190	A	20040726	NO 2004-3190	20040727
PRIORITY APPLN. INFO.:			SE 2002-5	A 20020102
			WO 2003-SE4	W 20030102

AB The invention discloses the use of sulfated glycosaminoglycans having an anticoagulant activity of 100 BP units/mg or less for the manufacture of a pharmaceutical preparation for prophylactic priming or curative treatment of the cervix and the myometrium for establishing effective labor in women.

REFERENCE COUNT: 2 THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L31 ANSWER 18 OF 21 CAPLUS COPYRIGHT 2006 ACS on STN  
 ACCESSION NUMBER: 2002:551534 CAPLUS <<LOGINID::20061204>>  
 DOCUMENT NUMBER: 137:99032  
 TITLE: Compositions for enhancing macromolecular drug transport across gastrointestinal tract  
 INVENTOR(S): Brayden, David J.; Dee, Jacqueline M.  
 PATENT ASSIGNEE(S): Elan Corporation, Plc, Ire.  
 SOURCE: U.S., 18 pp.  
 CODEN: USXXAM  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 6423334	B1	20020723	US 1998-163510	19980930
PRIORITY APPLN. INFO.:			US 1997-60618P	P 19971001

AB A composition for enteral administration having a non-ionic vegetable oil gastrointestinal tract (GIT) absorption enhancer capable of increasing the enteral absorbability of drugs, especially oral absorbability of hydrophilic and macromol. drugs. The nonionic vegetable oil GIT absorption enhancer, particularly Babassu oil or a derivative thereof, is capable of enhancing the uptake of a drug from the gastrointestinal tract so as to allow therapeutically effective amts. of the drug to be transported across the GIT of a mammal without significant toxic side effects. The effect of babassu oil on the flux of TRH across Caco-2 monolayers was examined by applying 0.12 nM TRH in the presence of 1% Babassu oil (8 mM) to Caco-2 monolayers for 2 h. The apparent permeability coefficient values increased from  $0.53 \times 10^{-6}$  for the control (TRH flux across Caco-2) to  $2.87 \times 10^{-6}$  for TRH flux across Caco-2 monolayers in the presence of 1% babassu oil. TRH was without effect on TEER with respect to loss of TEER in the controls (not treated with babassu oil). However, a statistically significant decrease of 78.2% in TEER was induced by treatment with 8 mM babassu oil during the flux.

REFERENCE COUNT: 19 THERE ARE 19 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L31 ANSWER 19 OF 21 CAPLUS COPYRIGHT 2006 ACS on STN  
 ACCESSION NUMBER: 2001:712142 CAPLUS <<LOGINID::20061204>>  
 DOCUMENT NUMBER: 136:35557  
 TITLE: Distinctive molecular profiles of high-grade and low-grade gliomas based on oligonucleotide microarray analysis  
 AUTHOR(S): Rickman, David S.; Bobek, Miroslav P.; Misek, David E.; Kuick, Rork; Blaivas, Mila; Kurnit, David M.; Taylor, Jeremy; Hanash, Samir M.  
 CORPORATE SOURCE: Departments of Pediatrics, University of Michigan Medical School, Ann Arbor, MI, 48109, USA

SOURCE: Cancer Research (2001), 61(18), 6885-6891  
 CODEN: CNREA8; ISSN: 0008-5472  
 PUBLISHER: American Association for Cancer Research  
 DOCUMENT TYPE: Journal  
 LANGUAGE: English

AB Astrocytomas are heterogeneous intracranial glial neoplasms ranging from the highly aggressive malignant glioblastoma multiforme (GBM) to the indolent, low-grade pilocytic astrocytoma. We have investigated whether DNA microarrays can identify gene expression differences between high-grade and low-grade glial tumors. We compared the transcriptional profile of 45 astrocytic tumors including 21 GBMs and 19 pilocytic astrocytomas using oligonucleotide-based microarrays. Of the .apprx.6800 genes that were analyzed, a set of 360 genes provided a mol. signature that distinguished between GBMs and pilocytic astrocytomas. Many transcripts that were increased in GBM were not previously associated with gliomas and were found to encode proteins with properties that suggest their involvement in cell proliferation or cell migration. Microarray-based data for a subset of genes was validated using real-time quant. reverse transcription-PCR. Immunohistochem. anal. also localized the protein products of specific genes of interest to the neoplastic cells of high-grade astrocytomas. Our study has identified a large number of novel genes with distinct expression patterns in high-grade and low-grade gliomas.

REFERENCE COUNT: 32 THERE ARE 32 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L31 ANSWER 20 OF 21 CAPLUS COPYRIGHT 2006 ACS on STN

ACCESSION NUMBER: 2001:338762 CAPLUS <<LOGINID::20061204>>  
 DOCUMENT NUMBER: 134:362292  
 TITLE: Methods of determining individual hypersensitivity to a pharmaceutical agent from gene expression profile  
 INVENTOR(S): Farr, Spencer  
 PATENT ASSIGNEE(S): Phase-1 Molecular Toxicology, USA  
 SOURCE: PCT Int. Appl., 222 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001032928	A2	20010510	WO 2000-US30474	20001103
WO 2001032928	A3	20020725		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG			

PRIORITY APPLN. INFO.: US 1999-165398P P 19991105  
 US 2000-196571P P 20000411

AB The invention discloses methods, gene databases, gene arrays, protein arrays, and devices that may be used to determine the hypersensitivity of individuals to a given agent, such as drug or other chemical, in order to prevent toxic side effects. In one embodiment, methods of identifying hypersensitivity in a subject by obtaining a gene expression profile of multiple genes associated with hypersensitivity of the subject suspected to be hypersensitive, and identifying in the gene expression profile of the subject a pattern of gene expression of the genes associated with hypersensitivity are disclosed. The gene expression profile of the subject may be compared with the gene expression profile of a normal individual and a hypersensitive individual. The gene expression profile of the subject that is obtained may comprise a profile of levels of mRNA or cDNA. The gene expression profile may be obtained by using an array of nucleic acid probes for the plurality of genes associated with hypersensitivity. The expression of the genes predetd. to be associated with hypersensitivity is directly related to prevention or repair of toxic damage at the tissue, organ or system level. Gene databases arrays and

apparatus useful for identifying hypersensitivity in a subject are also disclosed.

L31 ANSWER 21 OF 21 CAPLUS COPYRIGHT 2006 ACS on STN

ACCESSION NUMBER: 2001:300514 CAPLUS <<LOGINID::20061204>>  
DOCUMENT NUMBER: 134:331617  
TITLE: Oil-in-water emulsion compositions for polyfunctional active ingredients  
INVENTOR(S): Chen, Feng-jing; Patel, Mahesh V.  
PATENT ASSIGNEE(S): Lipocine, Inc., USA  
SOURCE: PCT Int. Appl., 82 pp.  
CODEN: PIXXD2  
DOCUMENT TYPE: Patent  
LANGUAGE: English  
FAMILY ACC. NUM. COUNT: 1  
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001028555	A1	20010426	WO 2000-US28835	20001018
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG			
US 2002107265	A1	20020808	US 1999-420159	19991018
US 6720001	B2	20040413		

PRIORITY APPLN. INFO.: US 1999-420159 A 19991018

AB Pharmaceutical oil-in-water emulsions for delivery of polyfunctional active ingredients with improved loading capacity, enhanced stability, and reduced irritation and local toxicity are described. Emulsions include an aqueous phase, an oil phase comprising a structured triglyceride, and an emulsifier. The structured triglyceride of the oil phase is substantially free of triglycerides having three medium chain (C6-C12) fatty acid moieties, or a combination of a long chain triglyceride and a polarity-enhancing polarity modifier. The present invention also provides methods of treating an animal with a polyfunctional active ingredient, using dosage forms of the pharmaceutical emulsions. For example, an emulsion was prepared, with cyclosporin A as the polyfunctional active ingredient dissolved in an oil phase including a structured triglyceride (Captex 810D) and a long chain triglyceride (safflower oil). The composition contained (by weight) cyclosporin A 1.0, Captex 810D 5.0, safflower oil 5.0, BHT 0.02, egg phospholipid 2.4, dimyristoylphosphatidyl glycerol 0.2, glycerol 2.25, EDTA 0.01, and water up to 100%, resp.

REFERENCE COUNT: 6 THERE ARE 6 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L34 ANSWER 1 OF 5 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2006278913 EMBASE <<LOGINID::20061204>>  
 TITLE: Management of the critically ill obstetric patient.  
 AUTHOR: Germain S.; Wyncoll D.; Nelson-Piercy C.  
 CORPORATE SOURCE: C. Nelson-Piercy, Department of Obstetrics and Gynaecology, St. Thomas' Hospital, Lambeth Palace Road, London SE1 7EH, United Kingdom. catherine.nelson-piercy@gstt.nhs.uk  
 SOURCE: Current Obstetrics and Gynaecology, (2006) Vol. 16, No. 3, pp. 125-133.  
 ISSN: 0957-5847 CODEN: COGYFP  
 PUBLISHER IDENT.: S 0957-5847(06)00041-2  
 COUNTRY: United Kingdom  
 DOCUMENT TYPE: Journal; Article  
 FILE SEGMENT: 005 General Pathology and Pathological Anatomy  
 010 Obstetrics and Gynecology  
 024 Anesthesiology  
 037 Drug Literature Index  
 038 Adverse Reactions Titles  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 19 Jul 2006  
 Last Updated on STN: 19 Jul 2006

AB Maternal mortality is rare in the UK at 13.1/100 000 deliveries, but could be further reduced, by prompt recognition of critical illness in the pregnant woman, earlier initiation of intensive care, and more senior involvement. Up to 0.9% of pregnant women require intensive care unit (ICU) admission, leading causes being obstetric haemorrhage and pre-eclampsia. Critical illness can be due to a pregnancy-specific condition, to pregnancy increasing susceptibility or causing deterioration, or unrelated to pregnancy. Critical care management involves initial resuscitation, monitoring and assessment of deranged physiology, and single or multiple organ support. The overall aim is to ensure adequate oxygen delivery and tissue perfusion. The management of various pregnancy-specific conditions and multi-organ critical illness disease states is discussed. The normal physiological adaptations to pregnancy and the effects of any drugs or procedures on the fetus should be taken into account. Recent advances in ICU management need to be applied to the pregnant population. .COPYRGT. 2006 Elsevier Ltd. All rights reserved.

L34 ANSWER 2 OF 5 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2006206866 EMBASE <<LOGINID::20061204>>  
 TITLE: Screening for thrombophilia in high-risk situations: Systematic review and cost-effectiveness analysis. The Thrombosis: Risk and Economic Assessment of Thrombophilia Screening (TREATS) study.  
 AUTHOR: Wu O.; Robertson L.; Twaddle S.; Lowe G.D.O.; Clark P.; Greaves M.; Walker I.D.; Langhorne P.; Brenkel I.; Regan L.; Greer I.A.  
 CORPORATE SOURCE: I.A. Greer, Division of Developmental Medicine, University of Glasgow, Glasgow, United Kingdom  
 SOURCE: Health Technology Assessment, (2006) Vol. 10, No. 11, pp. 1-75.  
 Refs: 163  
 ISSN: 1366-5278 CODEN: HTASFX  
 COUNTRY: United Kingdom  
 DOCUMENT TYPE: Journal; General Review  
 FILE SEGMENT: 010 Obstetrics and Gynecology  
 018 Cardiovascular Diseases and Cardiovascular Surgery  
 033 Orthopedic Surgery  
 036 Health Policy, Economics and Management  
 037 Drug Literature Index  
 038 Adverse Reactions Titles  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 5 Jun 2006  
 Last Updated on STN: 5 Jun 2006

AB Objectives: To assess the risk of clinical complications associated with thrombophilia in three high-risk patient groups: women using oral



oestrogen preparations, women during pregnancy and patients undergoing major orthopaedic surgery. To assess the effectiveness of prophylactic treatments in preventing venous thromboembolism (VTE) and adverse pregnancy outcomes in women with thrombophilia during pregnancy and VTE in patients with thrombophilia, undergoing major orthopaedic surgery. To evaluate the relative cost-effectiveness of universal and selective VTE history-based screening for thrombophilia compared with no screening in the three high-risk patient groups. Data sources: Electronic databases including MEDLINE, EMBASE, and four other major databases were searched up to June 2003. Review methods: In order to assess the risk of clinical complications associated with thrombophilia, a systematic review of the literature on VTE and thrombophilia in women using oral oestrogen preparations and patients undergoing major orthopaedic surgery; and studies of VTE and adverse obstetric complications in women with thrombophilia during pregnancy was carried out. Meta-analysis was used to calculate pooled odds ratios (ORs) associated with individual clinical outcomes, stratified by thrombophilia type and were calculated for each patient group. To assess the effectiveness of prophylaxis, a systematic review was carried out on the use of prophylaxis in the prevention of VTE and pregnancy loss in pregnant women with thrombophilic defects and the use of thromboprophylaxis in the prevention of VTE in patients with thrombophilia undergoing major elective orthopaedic surgery. Relevant data were summarised according to the patient groups and stratified according to the types of prophylaxis. A narrative summary was provided; where appropriate, meta-analysis was conducted. An incremental cost-effectiveness analysis was then carried out, from the perspective of the NHS in the UK. A decision analytical model was developed to simulate the clinical consequences of four thrombophilia screening scenarios. Results from the meta-analyses, information from the literature and results of two Delphi studies of clinical management of VTE and adverse pregnancy complications were incorporated into the model. Only direct health service costs were measured and unit costs for all healthcare resources used were obtained from routinely collected data and the literature. Cost-effectiveness was expressed as incremental cost-effectiveness ratios (ICERs); an estimate of the cost per adverse clinical complication prevented, comparing screening with no screening, were calculated for each patient group. Results: In the review of risk of clinical complications, 81 studies were included, nine for oral oestrogen preparations, 72 for pregnancy and eight for orthopaedic surgery. For oral contraceptive use, significant associations of the risk of VTE were found in women with factor V Leiden (FVL); deficiencies of antithrombin, protein C, or protein S, elevated levels of factor VIIIc; and FVL and prothrombin G20210A. For hormone replacement therapy (HRT), a significant association was found in women with FVL. The highest risk in pregnancy was found for FVL and VTE, in particular, homozygous carriers of this mutation are 34 times more likely to develop VTE in pregnancy than non-carriers. Significant risks for individual thrombophilic defects were also established for early, recurrent and late pregnancy loss; preeclampsia; placental abruption; and intrauterine growth restriction. Significant associations were found between FVL and high factor VIIIc and postoperative VTE following elective hip or knee replacement surgery. Prothrombin G20210A was significantly associated with postoperative pulmonary embolism. However, antithrombin deficiency, MTHFR and hyperhomocysteinaemia were not associated with increased risk of postoperative VTE. In the review of the effectiveness of prophylaxis, based on available data from eight studies, low-dose aspirin and heparin was found to be the most effective in preventing pregnancy loss in thrombophilic women during pregnancy, while aspirin alone was the most effective in preventing minor bleeding. All the studies on thrombophilia and major elective orthopaedic surgery included in the review of risk complications were also used in the review of the effectiveness of thromboprophylaxis. However, there were insufficient data to determine the relative effectiveness of different thromboprophylaxis in preventing VTE in this patient group. For the cost-effectiveness analysis, of all the patient groups evaluated, universal screening of women prior to prescribing HRT was the most cost-effective (ICER £6824). In contrast, universal screening of women prior to prescribing combined oral contraceptives was the least cost-effective strategy (ICER £202,402). Selective thrombophilia screening based on previous personal and/or family history of VTE was more cost-effective than universal screening in all the patient groups evaluated. Conclusions: Thrombophilia is associated with increased risks of VTE in women taking oral oestrogen preparations and

patients undergoing major elective orthopaedic surgery, and of VTE and adverse pregnancy outcomes in women with thrombophilia during pregnancy. There is considerable difference in the magnitude of the risks among different patient groups with different thrombophilic defects. In women who are on combined oral contraceptives, the OR of VTE among those who are carriers of the FVL mutation was 15.62 (95% confidence interval 8.66 to 28.15). However, in view of the prevalence of thrombophilia and the low prevalence of VTE in non-users of combined oral contraceptives, the absolute risk remains low. Significant risks for VTE and adverse pregnancy outcomes have been established with individual thrombophilic defects. Thrombophilic defects including FVL, high plasma factor VIIIc levels and prothrombin G20210A are associated with the occurrence of postoperative VTE in elective hip or knee replacement therapy. These associations are observed in patients who were given preoperative thromboprophylaxis and are, therefore, of clinical significance. Universal thrombophilia screening in women prior to prescribing oral oestrogen preparations, in women during pregnancy and in patients undergoing major orthopaedic surgery is not supported by current evidence. The findings from this study show that selective screening based on prior VTE history is more cost-effective than universal screening. Large prospective studies should be undertaken to refine the risks and establish the associations of thrombophilias with VTE among hormone users and in patients undergoing orthopaedic surgery. The relative value of a thrombophilia screening programme to other healthcare programmes needs to be established. .COPYRG. Queen's Printer and Controller of HMSO 2006. All rights reserved.

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ACCESSION NUMBER: 2005234180 EMBASE <<LOGINID::20061204>>  
 TITLE: Postpartum cerebellar infarction and haemolysis, elevated liver enzymes, low platelet (HELLP) syndrome.  
 AUTHOR: Altamura C.; Vasapollo B.; Tibuzzi F.; Novelli G.P.; Valensise H.; Rossini P.M.; Vernieri F.  
 CORPORATE SOURCE: F. Vernieri, Associazione Fatebenefratelli per la Ricerca, AFaR, Direzione Scientifica, Lungotevere Degli Anguillara 12, I-00153 Rome, Italy. fabrizioverni@tin.it  
 SOURCE: Neurological Sciences, (2005) Vol. 26, No. 1, pp. 40-42. . Refs: 8  
 ISSN: 1590-1874 CODEN: NESCCX  
 COUNTRY: Italy  
 DOCUMENT TYPE: Journal; Article  
 FILE SEGMENT: 008 Neurology and Neurosurgery  
 010 Obstetrics and Gynecology  
 018 Cardiovascular Diseases and Cardiovascular Surgery  
 022 Human Genetics  
 025 Hematology  
 037 Drug Literature Index  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 9 Jun 2005  
 Last Updated on STN: 9 Jun 2005

AB Pregnancy is considered to be a hypercoagulable state per se with an increased risk for cerebrovascular events, however cerebellar infarction has been rarely described in pregnant women. A nulliparous pre-eclamptic woman at 25 weeks' gestation was submitted to an echocardiographic exam that showed an impaired cardiac structure and function. After 2 h, the patient underwent caesarean section for diagnosis of haemolysis, elevated liver enzymes, low platelet (HELLP) syndrome. Afterwards her platelet count raised, and eight days later she developed nystagmus, ataxia, dysmetria and motor deficit in the right limbs and sensory impairment in the right side of the face and in the left limbs. Cerebral magnetic resonance imaging (MRI) demonstrated a right cerebellar and median posterior bulbar infarction. Colour-coded sonography of cerebral vessels showed an occlusion of the right vertebral artery. Coagulation pattern analysis evidenced double heterozygosis of the methylenetetrahydrofolate reductase (MTHFR) gene and single mutation of the prothrombin gene. This case report gives evidence of the importance of considering the different risk factors involved in stroke occurrence during pregnancy. .COPYRG. Springer-Verlag Italia 2005.

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ACCESSION NUMBER: 2001299667 EMBASE <<LOGINID::20061204>>  
 TITLE: Use of enoxaparin in a pregnant woman  
 with a mechanical heart valve prosthesis.  
 AUTHOR: Ellison J.; Thomson A.J.; Walker I.D.; Greer I.A.  
 CORPORATE SOURCE: Dr. J. Ellison, Glasgow University, Department of  
 Obstetrics, Glasgow Royal Infirmary, 10 Alexandra Parade,  
 Glasgow G31 2ER, United Kingdom  
 SOURCE: British Journal of Obstetrics and Gynaecology, (2001) Vol.  
 108, No. 7, pp. 757-759. .  
 Refs: 12  
 ISSN: 0306-5456 CODEN: BJOGAS  
 PUBLISHER IDENT.: S 0306-5456(00)00187-X  
 COUNTRY: United Kingdom  
 DOCUMENT TYPE: Journal; Article  
 FILE SEGMENT: 010 Obstetrics and Gynecology  
 018 Cardiovascular Diseases and Cardiovascular Surgery  
 037 Drug Literature Index  
 LANGUAGE: English  
 ENTRY DATE: Entered STN: 13 Sep 2001  
 Last Updated on STN: 13 Sep 2001

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ACCESSION NUMBER: 95161395 EMBASE <<LOGINID::20061204>>  
 DOCUMENT NUMBER: 1995161395  
 TITLE: [Anticoagulant therapy during pregnancy].  
 UTILISATION DES ANTICOAGULANTS PENDANT LA GROSSESSE.  
 AUTHOR: Lecuru F.; Taurelle R.; Desnos M.; Ruscillo M.M.  
 CORPORATE SOURCE: Service de Gynecologie-Obstetrique, Hopital Boucicaut, 78,  
 Rue de la Convention, F 75730 Paris Cedex 15, France  
 SOURCE: Presse Medicale, (1995) Vol. 24, No. 19, pp. 901-904. .  
 ISSN: 0755-4982 CODEN: PRMEEM  
 COUNTRY: France  
 DOCUMENT TYPE: Journal; General Review  
 FILE SEGMENT: 010 Obstetrics and Gynecology  
 018 Cardiovascular Diseases and Cardiovascular Surgery  
 025 Hematology  
 037 Drug Literature Index  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 27 Jun 1995  
 Last Updated on STN: 27 Jun 1995

AB Prolonged anticoagulant therapy may be indicated during pregnancy in  
 patients with inborn diseases affecting haemostasis, mechanical heart  
 valves, etc. A management scheme aimed at protecting both the mother and  
 the foetus is presented on the basis of pharmacological data, the main  
 series reported in the literature and the experience acquired at the  
 Boucicaut hospital in Paris. Heparin should be used during the first  
 trimester of pregnancy to avoid the teratogenic potential of antivitamin K  
 drugs and to reduce the incidence of spontaneous abortions which increases  
 in patients given oral anticoagulants. During the second and third  
 trimester, antivitamin K drugs can be used more easily than heparin with  
 no substantial increase in risk for the foetus. At delivery and during  
 the immediate post partum period it is imperative to use a compound which  
 does not cross the placental barrier (in order to avoid foetal  
 hypocoagulation) and which has a short half-life. Heparin is therefore  
 indicated again starting at eight months gestation. It is emphasized that  
 despite careful management and followup by the co-ordinated efforts of  
 cardiologists, obstetricians and the intensive care team haemorrhage  
 occurs in 17% of the pregnant women given anticoagulants,  
 particularly during the peri partum period.